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Bib Data Sheet

SERIAL NUMBER 09/596,499	FILING DATE 06/19/2000 RULE -	CLASS 366	GROUP ART UNIT 1723	ATTORNEY DOCKET NO. KOCH.67582
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APPLICANTS

Felix A. Streiff, Humlinkon, SWITZERLAND;

**** CONTINUING DATA *******

THIS APPLN CLAIMS BENEFIT OF 60/140,336 06/21/1999 CC

**** FOREIGN APPLICATIONS *******

None CC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/14/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 3	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Coolley</i> Initials CC				

ADDRESS

James H Marsh Jr
Shook Hardy & Bacon LLP
1200 Main Street
Kansas City ,MO 64105-2118

TITLE

Stacked static mixing elements

FILING FEE RECEIVED 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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CONFIRMATION NO. 2258

SERIAL NUMBER 09/596,499	FILING OR 371(c) DATE 06/19/2000 RULE	CLASS 366	GROUP ART UNIT 1723	ATTORNEY DOCKET NO. KOCH.67582	
APPLICANTS Felix A. Streiff, Humlinkon, SWITZERLAND; ** CONTINUING DATA ***** This appln claims benefit of 60/140,336 06/21/1999 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/14/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 3	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 1
ADDRESS Francis C. Hand Carella Byrne Bain Gilfillan Cecchi Stewart & Olstein Five Becker Road Roseland ,NJ 07068					
TITLE STACKED STATIC MIXING ELEMENTS					
FILING FEE RECEIVED 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		